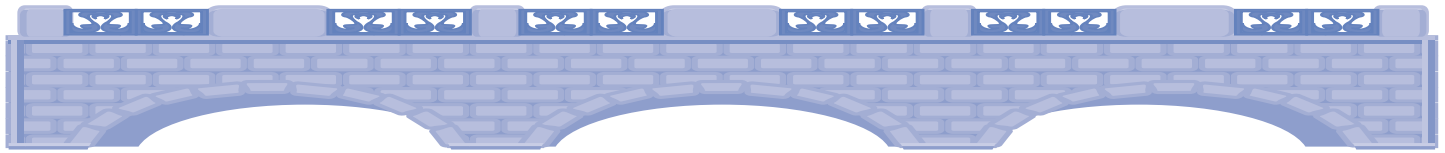


BRIDGES

KEEPING NEW JERSEY'S DENTAL PROFESSIONALS CONNECTED



Volume 2

NEW JERSEY STATE BOARD OF DENTISTRY

FALL 2004



John F. Ricciani, D.M.D.
President 2003-2004

President's Message

Prescribing Do's and Don'ts

By: John F. Ricciani, D.M.D.

It is not an unusual occurrence for the New Jersey State Board of Dentistry (Board) to be notified of incidents relating to prescribing practices. In 1997, the "Uniform Prescription Blank Law" became effective. This law was passed in response to rampant problems tied to the passing of illegal and forged prescriptions. This illicit activity was a contributor to the drug abuse problem, and is estimated to have cost millions of dollars to the Medicaid system, as well as to private insurers. The law requires that all prescriptions written in New Jersey be issued on a New Jersey Prescription Blank (N.J.P.B.). The forms are designed so that they cannot be copied or reproduced. The parent agency of the New Jersey State Board of Dentistry, the Division of Consumer Affairs, through the Office of Drug Control, is responsible for the administration of the program, including the selection and approval of vendors. Licensees may only purchase N.J.P.B.s from approved vendors. A complete listing of approved vendors may be found on the Board's Web page at [http:// www.NJConsumerAffairs.com/njpb.htm](http://www.NJConsumerAffairs.com/njpb.htm).

The law requires that licensed health care professionals who have prescriptive authority adopt strict security measures. Recently, the Division adopted new regulations that delineate the specific obligations of prescribers for the ordering, receipt, storage, maintenance and distribution of N.J.P.B. pads. The Board frequently receives reports about individuals who have been reported passing prescriptions illegally. Often, the individual involved is an employee or patient of a dental practice and the theft of prescriptions is associated with lax or non-existent internal controls. Being aware of the potential associated with the theft or alteration of prescriptions, licensees should be extraordinarily careful with their stock of N.J.P.B.s.

The theft or alteration of prescriptions is a criminal act in New Jersey. Should such an incident be reported to you by a vigilant pharmacist, you should immediately notify the local police and make a written report to be submitted within 72 hours to the Office of Drug Control. Likewise, if prescription pads are lost, stolen or missing, a report is required. For your convenience, the Incident Report form is reproduced in this newsletter on pages 14 and 15.

Dentists should be mindful of limitations on the scope of practice of dentistry when writing prescriptions. All prescriptions or drugs dispensed are required to be noted in a patient record and the prescription should have some rational nexus to the treatment being provided. Should the Board become aware of a prescription for a medication that is not accompanied by a patient record, or for medication for a condition unrelated to dental care, disciplinary action could result. The Board's Patient Record Regulation at N.J.A.C. 13:30- 8.7(a) requires that the record include the date and description of any medication either prescribed or dispensed, including a notation of the dosage. Alternatively, a copy of the prescription can be appended to the patient record. Dentists should pay close attention to having a complete patient history, and should regularly check with patients to

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New Jersey State Board of DENTISTRY NEWSLETTER

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*New Jersey State Board of Dentistry
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be aware of medications prescribed by other health care practitioners, to be alert to contraindications and complications that may be associated with the medication.

While the Board at present does not have specific regulations governing pain management, dentists should be aware that certain medications have a high potential for either abuse or physical or psychological dependence. Should patients exhibit symptoms requiring long-term prescribing, great care should be exercised. Where abuse is suspected, collaboration with other treating physicians is advisable. Given the proliferation of drugs available from illegal sources and through the Internet, or in treating patients with a known history of substance abuse, great care should be exercised to monitor the patient closely and document the patient record. While it might be easy to rationalize an unusual prescribing pattern as being in the best interests of controlling a patient's pain, in the long run a dentist may be doing the patient a severe disservice by failing to appropriately manage the patient's condition and by contributing to his or her dependence on narcotics.

It is not unusual for the Board to become aware of cases of "indiscriminate prescribing," especially if the prescribing patterns are demonstrated with several patients. Such cases are easily proven with pharmacy sweeps and reviews of patient records. In cases like this, the Board may impose serious disciplinary action on the grounds that the prescribing demonstrated repeated acts of negligence or incompetence. Sanctions could include an active suspension and a requirement to complete an intensive remedial education program in pharmacology and appropriate prescribing.

Licensees with questions are encouraged to write to the New Jersey State Board of Dentistry, P.O. Box 45005, Newark, NJ 07101, or call the Board's office at (973) 504-6405 for advice on these issues.

Proper Response Letters

By Herbert Dolinsky, D.D.S.

The New Jersey State Board of Dentistry receives hundreds of consumer complaints annually. A long-established process subsequently requires that the complaint be countered by a narrative response from the dentist. Most of these responses are professional, appropriate and explanatory. Unfortunately, a small percentage of the responses are unprofessionally executed, inappropriate in form and content, and fail to adequately address the complaint.

The following is a list of suggestions which will assist in effectively responding to the complaint and will greatly assist the Board in the resolution of the matter:

1. The respondent should recognize that the written response is a reflection of a dentist's professionalism and gives the readers (Board members) a substantial impression about the writer and the interaction with the patient.
2. The response should be submitted by the licensed dentist. Many responses are submitted by staff members or office managers. Your personal response is required.
3. Letters should not be handwritten, and especially not written in pencil or on any available piece of paper. Rather, they should be either typed or word-processed. Very often a case under review is delayed because the Board cannot read the handwriting.
4. Letterhead paper is appropriate;
5. Dates are necessary, i.e., date of the response;
6. Proper business letter form;
7. Proper, concise responses to the patient's allegations;
8. The response should be directed to the Executive Director or to the members of the New Jersey State Board of Dentistry. Nonspecific salutations like "To whom it may concern" are not appropriate;
9. Signatures on a letter should appear with either Dr. in front of the name without a degree after it or just the dental degree following the name, not both. The use of the title "Dr." in addition to your academic degree is redundant. For example, a letter should be signed "Dr. John Spade" or "John Spade, D.D.S.," but not "Dr. John Spade, D.D.S."

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Continuing Dental Education

By Sally-Jo Placa, D.M.D., President

All New Jersey dentists are required by statute to obtain 40 hours of continuing education credits for each biennial registration period. Although proof of such is not required at renewal, random audits are regularly conducted. Should you receive an audit letter, it is at this time that you will be required to produce proof of the 40 hours. Likewise, continuing education courses have certain limits. No more than 10 hours can be in the form of home or distance learning. Courses in nonclinical subjects are considered practice management and are limited to seven hours per period. Licensees are required to maintain proof of continuing education for a minimum of four years or two biennial registration renewal periods.

The Board will accept as legitimate proof of continuing education the following items:

1. A certificate or letter of completion. Certificates (or letters) should include the following:

- a. licensee's name;
- b. course name;
- c. instructor's name;
- d. course sponsor;
- e. date course was held;
- f. location;
- g. number of continuing education hours given for the course; and
- h. verification of successful completion of the course by the course sponsor.

2. Academy of General Dentistry (A.G.D.) transcripts are acceptable as legitimate proof of completed continuing dental education.

For more specific information or further questions, please refer to N.J.S.A. 45:6-10.1 through 45:6-10.8 and N.J.A.C. 13:30-5.1 through 13:30-5.3 in the New Jersey State Board of Dentistry Statutes and Regulations handbook.



Informed Consent

By Herbert Dolinsky, D.D.S., Vice President

Obtaining a written informed consent is a required risk management tool in health care institutions such as hospitals. Physicians, especially in specialties, routinely use informed consent forms. Recently, the use of such consent forms have been embraced by several dental specialties.

The New Jersey State Board of Dentistry regularly receives complaints from consumers who profess a lack of knowledge of and agreement to the procedures performed. Despite your best intention, often the intended outcomes, whether clinical or financial, are misunderstood by the patient. "The dentist did not make that fact clear to me" is a statement that frequently appears in patients' complaints.

While the New Jersey State Board of Dentistry's statutes and regulations at present do not require written informed consent for simple, routine dental care, the employment of such risk management vehicles could help to resolve many misunderstandings and posttreatment contentions. Where extensive restorative, esthetic and functional treatment plans are instituted, written informed consents should seriously be instituted and executed prior to initiating such treatment plans. Likewise, it is common that unanticipated conditions or circumstances arise that may lead to more extensive (and expensive) treatment plans. It is certainly advisable to revise your consent form appropriately to reflect the changed circumstances.



New Regulations

Delegation of Monitoring of Nitrous Oxide Analgesia to Registered Dental Hygienists and Registered Dental Assistants

(Effective October 20, 2003)

The Board office has recently received many inquiries regarding the changes in regulations relating to delegation of monitoring of nitrous oxide to licensed dental hygienists and registered dental assistants. Below you will find an abbreviated outline of the most recent changes:

A licensed dental hygienist, or registered dental assistant, practicing under the direct supervision of a licensed dentist may monitor a patient to whom the supervising dentist has administered nitrous oxide/oxygen inhalation analgesia, provided that he or she has successfully completed a Board-approved course offered in a C.O.D.A. (Commission on Dental Accreditation of the American Dental Association) approved college or university clinical setting or hospital setting which emphasizes the administration of nitrous oxide simultaneous with the administration of oxygen and safe and effective patient monitoring. The nitrous oxide/oxygen administration course shall be at least 14 hours in length, which shall include at least seven hours of didactic training and seven hours of clinical training. In addition, the clinical training shall include a minimum of 10 monitored administrations of nitrous oxide/oxygen inhalation analgesia. The licensed dental hygienist is also required to hold a current certification in Basic or Advanced Cardiac Life Support issued by the American Heart Association, the American Red Cross or an equivalent association approved by the Board.

Individuals qualifying for this expanded function will also be required to complete a three-hour didactic or clinical course in nitrous oxide/oxygen inhalation analgesia during every other registration renewal period. Completion of the recertification course shall be in addition to the continuing education requirements required for license renewal.

The licensed dental hygienist or registered dental assistant may only monitor the patient and maintain the therapeutic level of nitrous oxide/oxygen inhalation analgesia as established by the dentist. Upon any untoward reaction of the patient, the licensed dental hygienist or registered dental assistant shall immediately turn off the nitrous oxide/oxygen inhalation analgesia and summon the dentist.

The monitoring of nitrous oxide/oxygen inhalation analgesia by a registered dental hygienist, or by a registered dental assistant, without first having met the minimum standards of training and procedures as contained in this section shall constitute a deviation from the normal standards of practice required of a licensee. Likewise, an individual who engages in the activities outlined above without direct supervision shall be deemed to be engaging in an unauthorized practice and shall be subject to penalties.

Duties of the Supervising Dentist

A licensed dentist who permits a licensed dental hygienist or registered dental assistant to engage in the activities

outlined above without direct supervision shall be subject to the penalties.

“Administration” is defined in regulations to mean the determination and introduction of a therapeutic level of nitrous oxide/oxygen inhalation analgesia. This function is limited to a licensed dentist. “Direct supervision” means acts performed in the office of a licensed dentist wherein the dentist is physically present on the premises at all times during the performance of such acts and such acts are performed pursuant to the dentist’s order, control and full professional responsibility. The term “monitoring” means observing or checking a patient’s condition to assess the safety and comfort of the patient receiving nitrous oxide/oxygen inhalation analgesia.

When a supervising dentist induces or administers the nitrous oxide/oxygen inhalation analgesia to the patient, he or she shall exercise direct supervision and full responsibility for the patient. The dentist may delegate the monitoring of the nitrous oxide/oxygen inhalation analgesia to a licensed dental hygienist during the performance of dental hygiene procedures, provided that the patient is stabilized and that the licensed dental hygienist satisfies the training requirements set forth in the regulations.

A supervising dentist may also delegate the monitoring of the nitrous oxide/oxygen inhalation analgesia to a registered dental assistant. However, an R.D.A. is not permitted to perform any other function while monitoring the patient, provided the patient is stable and the registered dental assistant has met the regulation’s education requirements.

The supervising dentist may delegate the monitoring of the nitrous oxide/oxygen inhalation analgesia to a licensed dental hygienist or to a registered dental assistant, when the following conditions are met:

- a. The nitrous oxide/oxygen inhalation delivery system is a fail-safe unit which shall not deliver nitrous oxide unless oxygen is continuously flowing at a minimum of 30 percent and includes a scavenging system operating while the nitrous oxide is in use; and
- b. The dental office is equipped, at a minimum, with the following:
 - i. A high-speed vacuum source;
 - ii. Suction equipment;
 - iii. Equipment to deliver positive pressure oxygen; and
 - iv. Blood pressure monitoring equipment.

A supervising dentist shall not delegate the monitoring of nitrous oxide/oxygen inhalation analgesia to a licensed dental hygienist or to a registered dental assistant if a patient is taking any medications, whether prescribed by the dentist or by another licensed practitioner, that in the professional judgment of the

dentist may potentiate the effects of the nitrous oxide/oxygen inhalation analgesia, or may change the level of consciousness of the patient.

The supervising dentist shall be responsible for ensuring that the patient records are documented to reflect the nitrous oxide and oxygen flow rates and the analgesia duration and clearing times. The supervising dentist shall personally discharge the patient following the administration of nitrous oxide/oxygen inhalation analgesia.

The delegation of the monitoring of nitrous oxide/oxygen inhalation analgesia to a registered dental hygienist or registered dental assistant who has not yet met the minimum standards of training and procedures as stated herein constitutes a deviation from the normal standards of practice required of a licensee, and could potentially subject the licensed dentist to penalties for professional misconduct.

The complete regulations can be found at [N.J.A.C. 13:30-1A.2](#) (Scope of practice of licensed dental hygienist), [N.J.A.C. 13:30-2.4](#) (Scope of practice of registered dental assistant) and [N.J.A.C. 13:30-8.20](#) (Nitrous oxide/oxygen inhalation analgesia; duties of licensed dentist, delegation to a licensed dental hygienist and registered dental assistant). The regulations may also be found on the Board's Web page at www.NJConsumerAffairs.com/dentistry/dentlaws.pdf.

N.J.A.C. 13:30-8.2

Parenteral Conscious Sedation

(Effective July 7, 2003)

The State Board of Dentistry recently modified its regulations on parenteral conscious sedation to include a change in the educational requirements. The full text of the new rule is as follows:

Parenteral Conscious Sedation ("PCS") is defined as a depressed level of consciousness produced by the parenteral administration of pharmacologic substances that allows the patient to retain the ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command. This modality includes administration of medications via all parenteral routes, that is, intravenous, intramuscular, subcutaneous, submucosal, or inhalation, but does not include nitrous-oxide inhalation analgesia.

No dentist shall administer PCS unless the minimum standards of training and procedure set forth in this section are satisfied:

- (a) No dentist shall administer parenteral conscious sedation ("PCS") unless the minimum standards of training and procedure set forth in this section are satisfied.
- (b) PCS is defined as a depressed level of consciousness produced by the parenteral administration of pharmacologic substances that allows the patient to retain the ability to independently and continuously maintain an airway and respond appropriately to physical stimulation or verbal command. This modality includes administration of

medications via all parenteral routes, that is, intravenous; intramuscular, subcutaneous, submucosal, or inhalation, but does not include nitrous-oxide inhalation analgesia.

- (c) No dentist shall use PCS for dental patients unless such dentist possesses a PCS permit issued by the State Board of Dentistry for a specified practice location which shall be renewed biennially. A dentist shall obtain a separate PCS permit for each practice location at which PCS is administered, except as set forth in (j) below.
- (d) A dentist applying for a Board permit to administer PCS shall complete an application as provided by the Board. The dentist shall submit as part of a completed application a certification from an accredited university, teaching hospital or other training institution or facility approved pursuant to [N.J.S.A. 45:6-2](#), establishing that the applicant has completed formal training in the administration of PCS. Such formal training shall consist of, at a minimum, a combined 80 hours in didactic instruction and supervised clinical training in the administration of PCS. Such formal training shall have been completed within three years preceding the date of application. Supervised clinical training shall consist of, at a minimum, delivering intravenous, intramuscular, subcutaneous, submucosal and inhalation medications, monitoring patient activity and managing patient care for 20 PCS patients. As part of the dentist's PCS permit application, the institution shall certify the applicant is competent to:
 1. Evaluate the medical status of patients and perform risk management assessments according to American Society of Anesthesiology (ASA) Classification by use of patient histories, physical examinations, vital signs, and pertinent laboratory data and information obtained by medical consultations, and that the applicant can modify treatment plans accordingly;
 2. Understand and evaluate the effects of conscious sedation agents on the medical, physical and psychological status of patients;
 3. Perform venipunctures and maintain intravenous access during PCS procedures;
 4. Recognize and manage complications from drug administrations;
 5. Understand the clinical pharmacology and interactions of the drugs used for PCS;
 6. Maintain patient airways and support ventilation;
 7. Monitor patients during the administration of PCS using clinical evaluations and mechanical means including the use of an EKG monitor and a pulse oximeter and the interpretation of such readings;
 8. Recognize and manage anesthetic and medical emergencies arising from the use of PCS;
 9. Manage patients during the post-operative period and assess patients' suitability for discharge; and

continued on next page

New Regulations

10. Maintain accurate anesthetic records including drug dosages, vital signs and patient responses.
- (e) An applicant for a PCS permit shall obtain emergency training by completing “Basic Life Support: Course C” of the American Heart Association or its equivalent or a course in Advanced Cardiac Life Support or its equivalent and shall maintain current certification in such course. The applicant shall furnish proof of this training and certification to the Board upon application for a PCS permit and proof of recertification upon biennial renewal of the permit.
 - (f) An applicant for a PCS permit shall certify to the Board upon application for a permit and upon biennial renewal of the permit that the dentist employs no fewer than two persons who will be present in the office, at least one of whom shall assist in monitoring the patient whenever PCS is employed. The applicant shall further certify that these persons are trained in and capable of monitoring vital signs and of assisting in emergency procedures and that they maintain current certification in “Basic Life Support: Course C” or its equivalent or in Advanced Cardiac Life Support or its equivalent.
 - (g) An applicant for a PCS permit shall certify as part of the application for a permit and upon biennial renewal of the permit that he or she possesses basic equipment and supplies to deal with emergency situations. The permit holder’s facility shall contain the following readily accessible and properly operating equipment: emergency drug kit; positive pressure oxygen; stethoscope; suction; nasopharyngeal tubes; oropharyngeal tubes; a blood pressure monitoring device; an EKG monitor; and a pulse oximeter or its equivalent. The permit holder’s facility shall also contain back-up, battery-operated equipment consisting of, at a minimum, lighting, suction and a pulse oximeter, which shall be readily accessible and properly operating.
 - (h) A licensee who holds a current general anesthesia permit issued by the Board of Dentistry shall be authorized to use PCS and shall not be required to apply for a PCS permit pursuant to this section.
 - (i) A dentist who utilizes the services of a PCS permit holder or an M.D. or D.O. who is authorized to perform anesthesia services by the Board of Medical Examiners pursuant to N.J.A.C. 13:35-4A.1 shall not be deemed to be administering PCS, provided that the PCS permit holder or anesthesiologist remains present during the administration of PCS and bears full responsibility during the entire procedure until the patient has recovered fully and has been discharged.
 - (j) A PCS permit holder invited by a dentist to provide PCS services at a specific location shall bear full responsibility for compliance with all provisions of this section including the minimum requirements for assisting staff and equipment set forth in (f) and (g) above. When a PCS permit holder utilizes mobile equipment and supplies to administer PCS pursuant to this section, the mobile equipment and supplies of the permit holder shall be inspected by the Board or its designee not less than once every three years. “Mobile equipment and supplies,” for purposes of this subsection, means any equipment and/or supplies which are transported and used by a permit holder to administer PCS in one or more locations. When more than one permit holder utilizes the mobile equipment and supplies, it shall be the responsibility of the permit holder using the equipment and supplies to ensure that the mobile equipment and supplies satisfy the requirements of this section as set forth in (g) above prior to the administration of PCS.
 - (k) Prior to the administration of a PCS agent for the purpose of controlling pain, a physical evaluation of the patient shall be made by the permit holder and a complete medical history shall be obtained which shall include previous medications, allergies and sensitivities. The patient history shall be maintained in the files of each dentist for a period of not less than seven years. Specific records on the use of PCS shall be kept as part of every patient chart and shall include the type of agent, the dosage, and the duration of sedation.
 - (l) A licensee who holds a PCS permit shall certify to the Board upon biennial renewal that the holder has completed a least 20 hours during the previous two-year period in continuing education courses devoted to PCS consistent with the requirements set forth.
 - (m) Any designee of the Board shall be authorized during ordinary business hours to enter and inspect any dental office or mobile equipment and supplies for the purpose of enforcing the provisions of this rule.
-

Proper Response Letters

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It is required that responses to complaints should include a line-by-line transcription of your records. Board members need to have a clear understanding of a patient’s treatment. A transcription will greatly expedite the review of the matter.

Be sure to include any diagnostic data such as intraoral photographs, diagnostic radiographs and models with your response. This material should be appropriately mounted and dated.

The quality and completeness of the material submitted in response to a complaint affects the quality and expeditiousness of the Board’s review. Your cooperation is both expected and appreciated.

Check our Web site!

A great deal of information has been added to the Division of Consumer Affairs’ Web site, including an online listing of all licensees, current statutes and regulations, newly proposed regulations, Board meeting dates, agendas, public session minutes, special alerts, license renewal deadlines and extensions, disciplinary actions, and online change of address forms. The Web site can be accessed at:
<http://www.NJConsumerAffairs.com>

New Board Members Appointed

Peter L. DeSciscio, D.M.D.

Peter L. DeSciscio graduated from the University of Medicine and Dentistry of New Jersey Dental School in 1985. Dr. DeSciscio maintains a private practice of general dentistry in Perth Amboy, New Jersey. He is a fellow of the Academy of General Dentistry, American College of Dentists, and International College of Dentists. He has served as president of both the New Jersey chapter of the Academy of General Dentistry and the Middlesex County Dental Society. He also serves as a part-time faculty member with the New Jersey Dental School, where he is Clinical Associate Professor for the Department of Restorative Dentistry.

Herbert Dolinsky, D.D.S.

Dr. Dolinsky was appointed by the Governor to serve on the New Jersey State Board of Dentistry. He received his D.D.S. degree from New York University in 1963. He has practiced as an oral and maxillofacial surgeon in Jersey City since 1968. He is a Fellow of the American College of Dentists and a Diplomate of the American Board of Oral and Maxillofacial Surgery. He has also served on a wide range of committees, councils and commissions with the American Dental Association, the American Association of Oral and Maxillofacial Surgeons and the New Jersey Dental Association. He also served as delegate to the A.D.A. House of Delegates for 26 years. Dr. Dolinsky was twice appointed by the Governor of New Jersey to the New Jersey State Health Systems Coordinating Council and was elected for two terms as chairman of the Hudson Health Systems Agency.

Alexander Hall, D.M.D.

Governor McGreevey has appointed Dr. Alexander Hall to the New Jersey State Board of Dentistry. Dr. Hall is a general dentist practicing in both Plainfield and East Orange. He is a 1983 graduate of Fairleigh Dickinson University. Dr. Hall has been a member of the Essex County Dental Society and served from 1998 to 2002 as president of the Commonwealth Dental Association. He has also served as president of Dental Providers of New Jersey, Inc. a dental provider organization. In addition to his professional responsibilities, Dr. Hall serves as president of the Board of Health Commissioners in Orange, New Jersey.

Beverly A. Kupiec, R.N., Ph.D.

Government Member

Dr. Kupiec was recently appointed by Governor McGreevey as the government member of the New Jersey State Board of Dentistry. Dr. Kupiec serves as the School and Oral Health Coordinator in the New Jersey Department of Health and Senior Services. In that role, she serves as the Department's liaison to the New Jersey Oral Health Coalition and to the New Jersey Department of Education in the area of health for school age children. Dr. Kupiec also holds a faculty appointment in the Department of Community Health at the New Jersey Dental School.

Laura Leach, M.B.A.

Public Member

Laura Leach has been appointed by Governor McGreevey to serve as a public member of the New Jersey State Board of Dentistry. She is self employed, owning a business in graphic and Web design. In addition, she teaches graphic and Web design at the Chubb Institute; and she has taught at William Paterson University. She was also a marketing manager for both AT&T and Xerox. Her prior government experience includes service as a commissioner of the Morris County Board of Elections; a member of the Morristown Board of Adjustment for 13 years, four of which she served as chairwoman; and six years as a board member of the Southeast Morris County Municipal Utilities Authority. Ms. Leach holds a B.S. degree in Mathematics and an M.B.A. in Quantitative Methods.

Sally-Jo Placa, D.M.D., M.P.A.

Sally-Jo Placa was appointed to the New Jersey State Board of Dentistry by Governor James E. McGreevey. Dr. Placa holds a B.A. degree in Chemistry from Drew University, a D.M.D. from U.M.D.N.J. and a master's degree in Public Healthcare Services Administration from Kean University. Dr. Placa is on staff at the Jersey Shore University Medical Center where she serves as the assistant program director and clinical director to the General Practice Residency Program. She also serves the Department of Dentistry in the capacity of vice-chairwoman. Dr. Placa enjoys membership in the American Dental Association, the Academy of General Dentistry, the International Academy of Sports Dentistry and the American College of Healthcare Executives. Dr. Placa maintains a private dental practice with her husband in Woodbridge, New Jersey.

Board Actions

Marc Weber, D.M.D.

DI 18794, Red Bank

Settlement letter filed on July 11, 2002. Action based upon a recordkeeping violation regarding one patient. Payment of a penalty in the amount of \$500.

Bryan Harvey, D.D.S.

DI 21952, Jersey City

Order filed on August 6, 2002. License granted with restrictions. Opened upon an application for a residency training permit. ORDERED: Submit to random urine sampling once a week; continue participation with the Physicians' Health Program and shall have monthly face to face contact with representatives from that program; attend support groups, including N.A. or A.A., not less than three (3) times per week; no possession of any controlled dangerous substances with the exception of those issued by prescription.

Amer Azizogli, D.M.D.

DI 18853, Nutley

Consent Order filed on September 18, 2002. Failed to maintain adequate billing records. Billed the insurance company for incomplete bridgework and palliative treatment that had not been completed. ORDERED: Civil penalty totaling \$2,500, which represents a penalty of \$1,000 for poor recordkeeping; \$1,500 for repeated instances of improper insurance billing; costs of \$434; reimburse patient in the amount of \$2,860.

Ngan Hirai, D.M.D.

DI 15895, Clifton

Settlement letter filed on September 20, 2002. Action based on standard of care in treatment of one patient. Cease and desist from the practice of crown and bridge work; successfully complete a mini-residency in crowns and bridges such as that offered by the postgraduate education program offered at the New York University; the requirement to cease and desist will be lifted upon the submission of proof that the mini-residency program was completed successfully.

Robert Karasek, D.M.D.

DI 17237, Margate City

Order Permitting Practice with Restrictions filed on September 25, 2002, modifying the Order of Voluntary Surrender of Licensure entered on February 7, 2002. ORDERED: Submit to random urine sampling twice a week; continue participation with the Physicians' Health Program; attend support groups, including N.A. or A.A., not less than five (5) times per week; abstain from the use of alcohol and controlled dangerous substances; shall not possess any controlled dangerous substance except pursuant to a bona fide prescription. Controlled dangerous substance registration remains surrendered until further order of the Board. Shall be supervised by a licensed dentist; shall not work more than 25 hours per week; shall complete 30 continuing education credits necessary for the 2001-2003 renewal period; admonished for failing to maintain patient

records on family members for whom he prescribed controlled dangerous substances. May apply for modification of the terms of this order no sooner than one year following its entry.

John G. McIntyre, D.D.S.

(See also February 19, 2003)

DI 15633, Raritan

Final Order with permanent restrictions, civil penalties, costs of investigation, attorney fees, payment to receiver and restitution filed in the Superior Court of New Jersey, Chancery Division, Somerset County, on September 20, 2002. Engaged in the unlicensed practice of dentistry by continuing to practice dentistry after his license had been suspended. ORDERED: Permanently enjoined from advertising, operating or holding himself out to be a licensed dentist in this state, unless and until such time as he is duly authorized by the New Jersey State Board of Dentistry to do so; shall pay the receiver \$100 per hour for services; civil penalty in the amount of \$25,000 to the State of New Jersey; pay costs of the investigation in the amount of \$12,192.02; attorney fees in the amount of \$4,399.20; restitution to patients.

Philip G. Schrager, D.D.S.

DI 10171, North Brunswick

Final Order filed on September 25, 2002. Opened upon respondent's criminal conviction of theft by deception and admissions of insurance fraud. ORDERED: License to practice dentistry shall be suspended for a period of three years, 75 days of which shall be an active suspension and the balance to serve as a period of probation; civil penalty in the amount of \$15,000; attorney fees of \$9,540 and costs of \$2,284.22; attend "ProBE" or "Prime" ethics course and provide proof of successful completion of the course; random audits for a period of three years at his sole expense.

Michael Honrychs, D.M.D.

DI 15703, Voorhees

Order filed on September 25, 2002. Opened upon respondent's application seeking removal of remaining restrictions on his license. ORDERED: All restrictions and requirements imposed by prior Board orders are removed.

Steven M. Sura, D.M.D.

DI 12938, Bergenfield

October 11, 2002 modification of Settlement Letter In Lieu of Formal Disciplinary Complaint filed on December 18, 2001. Failed to meet the appropriate standard of care on one tooth. Continuing education requirement reduced from 14 hours to seven hours in oral diagnosis. Restitution of \$525 and costs of \$285.

Robert S. Posner, D.D.S.

DI 16280, Clark

Final Order filed on October 16, 2002. Order based upon respondent's guilty plea to two counts of criminal sexual contact. ORDERED: Suspension of dental license for eight (8) years, four years of which shall be served as an active suspension commencing nunc pro tunc June 19, 1998, the date on which his license was voluntarily suspended. The remaining four years to be served as a period of probation. Prior to his return to active practice, the respondent shall submit to the Board proof of completion of continuing education for the renewal periods 1999-2001 and 2002-2003; submit to an evaluation by the Physicians' Health Program; sit for and obtain a passing score in the North East Regional Boards or the Florida State Board examination. Upon return to practice, the respondent shall not engage in the practice of dentistry as a solo practitioner; shall provide for the presence of a monitor in the operatory at all times when treating patients; continue counseling as directed by a psychotherapist; costs in the amount of \$4,396.44. He shall appear before the Board three months before the end of the probation period to determine what restrictions, if any, should be continued or imposed by the Board.

Tina Shau-Ting Chung, D.M.D.

DI 19816, Clifton

Settlement letter filed on November 16, 2002. Payment of a penalty in the amount of \$2,500. Cease and desist allowing employees to perform activities that exceed the permissible scope of practice. Payment of the costs of the investigation of \$1,260.06.

John J. Carchman, D.D.S.

DI 64550, New Monmouth

Final Order filed on December 4, 2002. Order based on findings that respondent failed to maintain appropriate sanitary conditions at his dental office, engaged in indiscriminate prescribing practices, and failed to maintain a current C.D.S. registration. He also failed to comply with the Board's request for written statements and production of patient records, and treated a patient while his license was suspended. ORDERED: Respondent's license to practice dentistry shall be suspended for a period of five years beginning August 1, 2001, the date of his temporary suspension. The period of active suspension shall be an indefinite one, but not less than six months, and may be lifted following an appearance before the Board during which respondent demonstrates that he has complied with the terms of this Order and is fit to return to practice. Respondent shall enroll in the Physicians' Health Program, shall submit random urine monitoring not less than twice a week and shall attend N.A./A.A. meetings not less than five times a week. He also shall comply with all medical and psychological treatment recommendations and permit the Board to receive reports on a quarterly basis. Prior to the application to lift the active suspension, he shall successfully complete in advance of and in addition to continuing education credits for the 2003-2005 biennial renewal. Seven hours in endodontics, 14 hours in infection control and aseptic

techniques and an "Appropriate Prescribing of Controlled Dangerous Substances" course. Civil penalties of \$6,500 and costs of \$15,130.90.

John P. Leonard, D.M.D.

(See also April 15, 2003)

DI 10467, Lakewood

Consent Order of Voluntary Surrender of Licensure filed on December 4, 2002. Opened upon receipt of information that respondent, while under a Board-ordered monitoring program, had tested positive for use of Percocet and had entered into an inpatient program. Respondent failed to comply with the terms of an Interim Consent Order filed on November 14, 2001. ORDERED: Surrender dental license for a minimum period of six months; comply with directives for dentists who surrender licensure. Prior to any restoration of license, he shall appear before the to Board discuss his readiness to re-enter the practice of dentistry, and he shall provide the Board with evidence that he is capable of discharging the functions of a licensee in a manner consistent with the public's health safety and welfare. He also shall provide the Board with reports from each and every mental health professional who has participated in respondent's care; provide the Board with a report from the Physicians' Health Program detailing the nature and extent of respondent's involvement and its recommendation regarding application to re-enter practice.

Barry Eisenman, D.M.D.

DI 15746, Hamburg

Settlement letter filed on January 10, 2003. Action based upon the standard of care regarding one patient. The doctor consented to 35 hours of continuing education, random audits, restitution to the patient in the amount \$1,600, \$1,500 in penalties and costs of \$450.

Anthony Sapienza, D.D.S.

DI 15892, Paramus

Consent Order filed on January 22, 2003. Opened upon an arrest in Bergen County on January 18, 2000. Respondent entered into an Interim Consent Order with the Board in which he agreed to submit to the monitoring of his dental practice while rendering dental services to female patients pending final disposition of any proceedings against him. On or about May 31, 2001, respondent pled guilty to harassment and was sentenced to one year of probation. ORDERED: Interim Consent Order requiring monitoring is vacated. Suspension from practice of dentistry for one year, all of which shall be stayed and served as a period of probation. Civil penalty in the amount of \$2,500.

Robert Wollman, D.D.S.

DI 114414, Middletown

Order for reinstatement of license filed on February 5, 2003. The New Jersey State Board of Dentistry received a request from respondent for reinstatement of his license which he had voluntarily surrendered on August 1, 2001. ORDERED:

continued on next page

Board Actions

Respondent shall submit to random urine sampling once a week, and continued counseling in A.A. and N.A.. He shall work in a group practice and perform clinical services only when another licensed dentist is present.

Gordon R. Barnes, D.D.S.

DI 17770, Somerset

Final Order of Discipline filed on February 5, 2003. Respondent had provided anesthesia services within a medical practice for patients undergoing nondental procedures. Respondent also failed to complete continuing education (C.E.) credits as required for renewal of licensure. ORDERED: Respondent shall cease and desist from performing anesthesia services for medical procedures. Assessed civil penalties of \$2,000; costs of \$3,577.64; 16 hours of C.E.

Elli Schulman, D.D.S.

DI 16361, Clifton

Consent Order filed on February 5, 2003. A complaint by a former employee was filed alleging that respondent allowed an unlicensed, unregistered dental hygienist to render treatment to patients. The allegations, if true, would form the basis for disciplinary action pursuant to N.J.S.A. 45:1-21e. Respondent denied the allegations, but desired to resolve the matter without any admissions and agreed to pay costs and assessments in the amount of \$12,208.64.

John G. McIntyre, D.D.S.

(See also September 20, 2002)

DI 15633, Raritan

Consent Order filed on February 19, 2003. Respondent treated patients after his license to practice dentistry was suspended. ORDERED: Respondent shall immediately surrender his license to practice dentistry.

Ralph J. Sharow, D.M.D.

DI 016103, Freehold

Consent Order filed on February 19, 2003. Respondent pled guilty to one count of health care fraud and one count of income tax evasion in United States District Court. Respondent was sentenced to federal prison to serve 27 months concurrently. ORDERED: Respondent's license to practice dentistry in New Jersey shall be immediately revoked; respondent shall return the original C.D.S. registration to the Board.

Salvatore Napoli, M.D., D.D.S.

DI 14566, Maywood

Order Removing License Restrictions filed on March 5, 2003. Respondent seeking removal of prior restrictions on his license imposed by the Board based on substance abuse. ORDERED: Restrictions imposed upon the license to practice dentistry are vacated.

Mark Spierer, D.D.S.

DI 11958, Kearny

Consent Order filed on March 5, 2003. A random and unannounced audit of 10 patient and billing records resulted in a finding of deficiencies in patient records. Specifically, fees for services rendered were not entered into patients' charts at the time of service. ORDERED: Respondent's license to practice dentistry shall be suspended for a period of four years. The suspension shall be stayed and served as a period of probation, so long as respondent complies with all terms of the order, including random and unannounced quarterly audits of patient billing records, and pays a civil penalty of \$7,500.

Dr. Larbi Zouak

DI 17242, Englewood

Settlement letter filed on April 2, 2003. Action based upon a biennial continuing education requirement. Consent to the completion of 59 continuing education credits by October 31, 2003, a penalty in the amount of \$2,500 for the failure to complete the required continuing education for both the 1997-1999 and the 1999-2001 renewal periods and a \$500 penalty for poor recordkeeping.

Marvin C. Lache, D.D.S.

DI 10293, Wayne

Consent Order filed on May 5, 2003. Respondent failed to render treatment within the standard of care for practitioners in this state and failed to meet minimum continuing education credits. ORDERED: Respondent shall successfully complete a total of 46 hours of C.E.: 31 hours are remedial C.E. and the remaining 15 are to fulfill the requirements for 1999-2000 renewal period; Reimburse patient \$6,300; civil penalties of \$5,500.

Harry Cygler, D.M.D.

(See also August 28, 2003 and February 18, 2004)

DI 10245, Berlin

Consent Order filed on May 5, 2003. Respondent verbally abused patients and tested positive for cannabis. ORDERED: Respondent shall submit to random urine sampling and continued counseling, including weekly sessions to focus on anger management.

David J. Garbolino, D.M.D.

(See also August 22, 2003)

DI 14053, Wall

Consent Order with Restrictions on License filed on May 28, 2003. Arrested for inhaling fumes of toxic chemical for purpose of causing intoxication. ORDERED: Respondent shall abstain from possessing nitrous oxide and shall not possess nitrous oxide equipment. In addition, he shall submit to random urine sampling a minimum of twice a month, and continued counseling.

Marianne Mauro, D.M.D.

(See also May 19, 2004)

DI 17117 Red Bank

Consent Order of Voluntary Surrender of Licensure filed on June 18, 2003. Arrested for disorderly conduct and allegedly engaged in the use of illegal drugs. Drug screen performed on hair sample tested positive for cocaine and opiates. ORDERED: Surrender of license for a minimum period of six months; required to demonstrate competency and ongoing recovery prior to reinstatement.

Donald Dobrowolski, D.M.D.

DI 13038, Brick

Consent Order with restrictions of license filed on July 9, 2003. ORDERED: License reinstated with restriction; random urine sampling twice a week; continue participation with the Chemical Dependency Program; attend support groups not less than two times per week; abstain from the use of alcohol and controlled dangerous substances; continue psychotherapy; shall not prescribe or dispense controlled dangerous substances.

Maximo Villalona

(unlicensed)

Consent Order filed on July 23, 2003. ORDERED: Permanent enjoinder from offering or engaging in any activity constituting the practice of dentistry in the State of New Jersey.

Edgar P. Lea, D.D.S.

DI 7435, Phillipsburg

Consent Order filed on August 12, 2003. Respondent failed to treat a patient in a manner consistent with the standard of care in this state. Specifically, it has been alleged that respondent failed to adequately examine the patient and speak to the patient concerning needed periodontal work. ORDERED: Civil penalties of \$5,000 and costs of \$286.50.

John P. Leonard, D.D.S.

(See also December 4, 2002)

DI 10467, Lakewood

Consent Order of Reinstatement filed on August 15, 2003. ORDERED: Respondent's license is reinstated subject to the following conditions: Weekly urine screens, continued weekly group therapy sessions, and maintaining abstinence from all mood-altering drugs unless prescribed by a physician/dentist who is aware of his clinical history.

David J. Garbolino

(See also May 28, 2003 and December 3, 2003)

DI 14053, Wall

Administrative Action to Voluntary Surrender of License filed on August 22, 2003. Respondent was arrested for inhaling fumes of toxic chemical (nitrous oxide gas). Following his arrest, respondent agreed to remove all nitrous oxide equipment from his office and was admitted into the Pre-Trial Intervention Program. Respondent entered into a Consent Order with the Board

in May 2003 in which he agreed to abstain from the use of illegal drugs and submit to random urine monitoring. The Board has received information that two urine specimens in July 2003 have tested positive for marijuana. ORDERED: Respondent shall immediately surrender his license for a minimum of three months.

Harry Cygler, D.M.D.

(See also August 28, 2003 and February 18, 2004)

DI 10245, Berlin

Consent Order filed on August 28, 2003. Order modifying the terms of the Board's consent order entered in April 2003. ORDERED: Respondent shall submit to random urine monitoring not less than one time a month for three months, then quarterly until January 2004. Respondent will continue face to face visits with representatives of the Physicians' Health Program on a quarterly basis.

Abdel Baghal, D.D.S.

DI 18223, Wayne

Consent Order filed on September 12, 2003. Dr. Baghal failed to provide adequate dental care to several patients and improperly maintained patients' treatment records. Allegations include inappropriate dental treatment, poor X-ray quality, diagnosis and treatment, poor bridge and restoration work, and a two-tiered billing schedule. Failure to complete the required continuing education (C.E.) for 1999-01 renewal period ORDERED: Civil penalties of \$6,500 Costs of investigation to the state of \$5,832. Complete 42 hours of C.E. Respondent shall reimburse both complainants.

Michael C. Tsimis, D.M.D.

DI 1642, Tenafly

Consent Order filed on September 12, 2003. Respondent engaged in repeated acts of improper billing in violation of Board regulations at N.J.A.C. 13:30-8.10, and failed to maintain complete and accurate records. ORDERED: Respondent's license to practice dentistry is hereby suspended for two years, all of which is stayed to serve as a period of probation. Civil penalties of \$8,500 and investigation costs of \$11,158.59.

Hal M. Hirsch, D.M.D.

DI 15812, Laurel Springs

Consent Order filed on September 16, 2003. Respondent performed a dental procedure on the wrong tooth and left the patient who was receiving unsupervised administration of nitrous oxide. ORDERED: Respondent shall successfully complete a course in professional ethics. Civil penalties of \$3,500 and costs of \$254.66.

Joseph Duddy, D.M.D.

DI 16371, Spring Lake Heights

Interim Consent Order with Restrictions on License November 5, 2003. Respondent was arrested for possession of cocaine and marijuana in September 2003. Following his arrest, respondent entered into the Chemical Dependency Program of

continued on next page

Board Actions

the New Jersey Dental Association. Pending Board review of the C.D.P. report, respondent has agreed to practice dentistry with restrictions. ORDERED: Respondent shall enter into a four-day in-patient assessment program as arranged by the C.D.P., abstain from the use of alcohol and controlled dangerous substances and submit to random urine sampling a minimum of twice a week.

Stacy J. Cupolo, R.D.H.
HI 4579, Point Pleasant

Consent Order of Suspension of License filed on November 5, 2003. Respondent was arrested on two occasions for passing forged prescriptions. Based on her own admission that she had taken prescription blanks from a dental office in which she worked, wrote prescriptions for Vicoprofen in the name of her grandmother and signed the dentist's name. ORDERED: Respondent's license to practice dental hygiene is suspended for a minimum of six months.

Christopher P. Mulloy, D.M.D.
DI 17268, Somerville

Consent Order with Restrictions on License filed on November 5, 2003. Respondent had inhaled nitrous oxide gas for the purpose of intoxication on more than one occasion. ORDERED: Respondent agrees to abstain from the use of intoxicating substances. Dr. Mulloy may continue to practice dentistry with restrictions and monitoring. Respondent shall abstain from using nitrous oxide, submit to random urine sampling a minimum of four times a month and Dr. Mulloy shall attend support groups, including N.A. or A.A., not less than four times per week.

John G. McIntyre, D.D.S.
(See also September, 20, 2002 and February 19, 2003)
DI 15633, Raritan

Consent Order Agreeing to Restitution and Judgment previously ordered on September 20, 2002. ORDERED: Consent Order filed in New Jersey Superior Court, Somerset County. Pay civil restitution in the amount specified in the order for the one hundred and one (101) patients. In the event respondent does not pay the restitution within (10) days of the filing of the order, judgments shall be entered against respondent.

David J. Garbolino, D.M.D.
(See also May 28, 2003 and August 22, 2003)
DI 14053, Wall

Order of Reinstatement with Restrictions of License filed on December 3, 2003. ORDERED: Reinstatement of dental license on December 3, 2003, with restrictions; random urine sampling a minimum of two times per week at a laboratory approved by the Board; abstain from any and all intoxicating substances, including but not limited to nitrous oxide and alcohol as well as controlled dangerous substances; continued participation in New Jersey Dental Association's Chemical Dependency Program with a minimum monthly face to face contact with a representative of

the program; attend support groups not less than four times per week; provide a copy of the log maintained in the office, listing all purchases and acquisitions of any controlled dangerous substances.

Robert Poli, D.M..D.
DI 12569, Fort Lee

Final Order of Discipline filed on December 17, 2003. ORDERED: Reprimanded for engaging in an activity that constitutes insurance fraud; successfully complete seven hours of continuing education courses in proper recordkeeping within three months of the entry of the order.

Joseph P. Buttacavoli, D.D.S.
DI 010441, Brick

Consent Order filed on January 21, 2004, based upon indiscriminate prescribing deemed to be professional misconduct and failure to maintain complete and accurate patient records. ORDERED: Successful completion of a course entitled "Clinical Dental Pharmacology, Avoiding Prescribing Errors and Liability"; successfully complete the ProBE course; civil penalty in the amount of \$7,500 and costs in the amount of \$1,315.87

Terence Stradford, D.D.S.
DI 17551, West Berlin

Final Order of Discipline filed on February 4, 2004, based upon a failure to cooperate with a Board investigation. ORDERED: Respondent's license to practice dentistry in the State of New Jersey is hereby suspended for a period of 90 days. Respondent is assessed a civil penalty in the amount of \$10,000.

Harry Cygler, D.M.D.
(See also May 5, 2003 and August 28, 2003)
DI 10245, Berlin

Order filed on February 18, 2004. ORDERED: Respondent seeks to remove remaining restrictions placed on his license pursuant to a Consent Order entered on May 5, 2003. Restrictions imposed by the Board's earlier orders are lifted, effective immediately.

Michael Felber, D.D.S.
DI 20145, Oradell

Consent Order filed on March 17, 2004. Respondent tested positive to drug screenings that were ordered from a previous Consent Order entered on November 14, 2001; and admitted that he had performed a root canal on himself. ORDERED: Respondent reprimanded for violation of a previous Consent Order and found to have committed repeated acts of negligence by performing root canal on himself. Respondent shall cease and desist in the use of any controlled dangerous substances, alcohol or the use of any psychoactive substances, except on the prescription of a physician. Respondent shall engage in ongoing counseling at his own expense a minimum once per week; begin a 12-step program; submit a urine sample four times a month, on a random basis. Costs of \$392.50.

Board Actions

Max Kaplan, D.D.S.

DI 8398, Lakewood

Settlement Letter in Lieu of Formal Disciplinary Proceedings filed on March 22, 2004, based upon standard of care complaints on one patient and recordkeeping violations. ORDERED: Penalty of \$500 and restitution to the patient in the amount of \$973.00.

Cornelius Gaither, D.D.S.

DI 5894, Swedesboro

Consent Order filed on March 25, 2004, based upon engaging in repeated acts of negligence, malpractice or incompetence; failure to maintain adequate records. ORDERED: Respondent shall cease and desist from engaging in oral surgery until completion of N.E.R.B. Diagnostic Clinical Simulated Examination; seven hours of continuing education in recordkeeping; subject to random audits. Costs of \$2,289.00

John R. Vitale, Jr., D.M.D.

DI 9466, Jersey City

Settlement Letter in Lieu of Formal Disciplinary Proceedings filed on March 25, 2004, based upon repeated acts of negligence relating to the treatment of one patient and failure to maintain adequate records. ORDERED: Payment of penalty of \$1,500 for records violation; restitution of \$1,400; completion of 21 hours of Board-approved continuing education.

Joel P. Kurtz, D.M.D.

DI 9153, Sparta

Order of Temporary Suspension filed on March 31, 2004, based upon a preliminary finding that respondent engaged in sexual misconduct with nine patients and that continued practice constitutes a clear and immediate danger to the public health, safety or welfare. ORDERED: Temporary suspension pending a plenary hearing effective March 12, 2004.

Yevgeny Oleynik, D.D.S.

DI 19879, Brooklyn, NY

Consent Order filed on May 3, 2004, based upon two counts of professional misconduct by a New York Consent Order relating to the failure to maintain an accurate record and placed a post that resulted in an apical perforation. ORDERED: One-year suspension which shall be stayed. Suspension will automatically become active if all provisions of the New York Consent Order are not satisfied, or if there are any improprieties or violations of the Board's regulations.

Jill Zaleski, D.M.D.

DI 16711, Cherry Hill

Order of Reinstatement with Restrictions of License filed on May 19, 2004. ORDERED: Reinstatement of dental license with restrictions. Practice limited to 25 hours per week; licensed or registered dental auxiliary shall be present in the office; random urine testing at least one time per week; participate in New Jersey Dental Association's Well Being Program; continue with psychotherapy; attend N.A. or A.A. meetings not less than three

times per week. Respondent shall abstain from the use of alcohol and controlled dangerous substances. Quarterly reports to be submitted by Well Being program. No modification any sooner than six months from entry of the Order. An appearance before the Board shall be required before any modification.

Lora A. Montegari-Grosser, R.D.H.

HI 4514, Vernon

Settlement Letter in Lieu of Formal Disciplinary Proceedings filed on May 26, 2004. Action based upon a failure to complete biennial continuing education requirement for the 2000-2001 biennial period. Consent to the completion of 10 continuing education credits by September 30, 2004, and a penalty in the amount of \$250.

Marianne Mauro, D.M.D.

(See also June 18, 2003)

DI 17117, Red Bank

Order of Reinstatement filed on May 18, 2004. ORDERED: License reinstated with restrictions. Respondent shall abstain from any and all intoxicating substances, submit to random urine screens a minimum of once per week. Continue treatment with Board-approved psychiatrist and psychotherapist until further order by the Board; participate in group therapy sessions for professionals with chemical addictions; and continue to attend N.A./A.A. meetings four times per week. C.D.S. privileges shall remain suspended.

N.J. State Board of Dentistry Meeting dates for 2005:

January 5 and 19
February 2 and 16
March 2 and 16
April 6 and 20
May 4 and 18
June 8 and 22
July 6 and 20
August 3 and 17
September 7 and 21
October 5 and 19
November 2 and 16
December 7 and 21

N.J.P.B. INCIDENT REPORT

DATE OF REPORT: _____

DATE OF INCIDENT: _____

Send To:
State Of New Jersey
Office Of Drug Control - N.J.P.B. Unit
P.O. Box #45045
124 Halsey Street, 3rd Floor,
Newark, NJ 07102
Tel #: 973-504-6561 or 6266
Fax #: 973-648-3566
973-504-6326

From: (Identify Person Reporting Incident)

Name & Title: _____

Affiliation: _____
(Prescriber / Healthcare Facility / Printer / Pharmacist / Law Enforcement Agency/ Other)

Address: _____

City, State, County, Zip: _____

(Tel #) _____ (Fax #) _____

(REPLY AS APPLICABLE, AND PLEASE PRINT ALL INFORMATION)

I**DESCRIPTION OF THE NJPB INVOLVED IN THE INCIDENT**(NAME OF PRESCRIBER & PROFESSIONAL DEGREE, OR NAME OF
HEALTHCARE FACILITY APPEARING ON THE INVOLVED N.J.P.B.
FORM)(PROFESSIONAL LICENSE NO. OR HEALTHCARE FACILITY
PROVIDER NO. APPEARING ON THE INVOLVED N.J.P.B. FORM)

(STREET ADDRESS)

(CITY, STATE, COUNTY, ZIP)

TELEPHONE #: _____

BATCH #: _____

SERIAL # IF APPLICABLE: _____

II**THE INCIDENT THAT OCCURRED INVOLVES**(Check Applicable Incident and as appropriate
complete
SECTIONS "III" , "IV" and "V" of this form)☐ MISPLACED (LOST)☐ STOLEN☐ DAMAGED☐ OTHER (DESCRIBE BELOW): _____☐ FORGED☐ ALTERED☐ COUNTERFEIT☐ LOST IN DELIVERY**III****FOR MISSING N.J.P.B.s REPLY AS APPLICABLE:****A. THE MISSING N.J.P.B.s WERE (CHECK THE APPROPRIATE OCCURRENCE):**1. ☐ MISPLACED (LOST)2. ☐ STOLEN3. ☐ LOST IN DELIVERY4. ☐ OTHER (BRIEFLY DESCRIBE BELOW): _____**B. THE NUMBER OF MISSING N.J.P.B.s IS ESTIMATED TO BE:** _____**C. THE INCIDENT INVOLVING THE MISSING N.J.P.B.s**1. ☐ HAS NOT BEEN REPORTED TO ANY GOVERNMENTAL AGENCY, PROFESSIONAL ASSOCIATION OR SOCIETY OR OTHER
ORGANIZATION.2. ☐ HAS BEEN REPORTED TO:a. ☐ THE APPROPRIATE LICENSING BOARD (NAME): _____b. ☐ THE PRINTER FROM WHOM PURCHASED (NAME): _____c. ☐ THE PRESCRIBER OR HEALTHCARE FACILITY APPEARING ON THE N.J.P.B. (NAME BELOW): _____d. ☐ THE FOLLOWING LAW ENFORCEMENT AGENCIES, PROFESSIONAL ASSOCIATIONS / SOCIETIES AND/OR OTHER
ORGANIZATION:

(1)

(2)

NAME:

ADDRESS:

TEL. #:

PERSON:

IV

FOR FORGED, ALTERED OR COUNTERFEIT N.J.P.B. INCIDENTS, REPLY AS APPLICABLE:

A LIST THE PERSON(S) INVOLVED IN THE INCIDENT, AND INCLUDE ALL NAMES, ADDRESSES AND TELEPHONE NUMBERS UTILIZED:

1.			2.		
NAME:		FICTITIOUS N <input type="checkbox"/> Y <input type="checkbox"/>	NAME:		FICTITIOUS N <input type="checkbox"/> Y <input type="checkbox"/>
ADDRESS:			ADDRESS:		
TEL. #:			TEL. #:		

3.			4.		
NAME:		FICTITIOUS N <input type="checkbox"/> Y <input type="checkbox"/>	NAME:		FICTITIOUS N <input type="checkbox"/> Y <input type="checkbox"/>
ADDRESS:			ADDRESS:		
TEL. #:			TEL. #:		

B. WAS THE PERSON(S) INVOLVED IN THE INCIDENT ARRESTED?
IF YES, ENTER:

NO ☐ YES ☐

1. NAME OF LAW ENFORCEMENT AGENCY: _____
2. ADDRESS: _____
3. TELEPHONE NUMBER: _____
4. ARRESTING OFFICER OR CONTACT AT AGENCY: _____

C. CHECK WHETHER THE MEDICATION INVOLVED IN THE INCIDENT WAS A:

1. ☐ CDS (ENTER NAME OF SUBSTANCE): _____
2. ☐ PLD (ENTER NAME OF MEDICATION): _____

D. WAS AN ATTEMPT MADE TO BILL A THIRD-PARTY PRESCRIPTION PROGRAM FOR THE MEDICATION INVOLVED IN THE INCIDENT?
NO ☐ YES ☐ IF YES, ENTER THE FOLLOWING INFORMATION:

1. THE NAME OF THE PROGRAM ADMINISTRATOR: _____
2. THE TELEPHONE NUMBER (IF AVAILABLE): _____
3. THE PATIENT I.D. NUMBER: _____
4. THE THIRD PARTY GROUP NUMBER: _____
5. THE PERSON NUMBER: _____

6. WAS THE THIRD PARTY ADMINISTRATOR NOTIFIED OF THE INCIDENT? NO ☐ YES ☐ IF YES, ENTER

THE NAME OF THE PERSON TO WHOM REPORTED: _____

V

ARE YOU AWARE OF ANY INCIDENTS INVOLVING THE USE OF THE MISSING BLANKS? NO ☐ YES ☐
IF YES, ENTER THE NAME, ADDRESS AND TELEPHONE NUMBER OF THE PHARMACY OR PHARMACIES WHERE THE MISSING BLANKS WERE REPORTED AS PRESENTED TO BE FILLED:

A

B.

NAME:		
ADDRESS:		
Tel #:		

COMMENTS

Signature & title of person preparing this form

New Jersey Office of the Attorney General
Division of Consumer Affairs
New Jersey State Board of Dentistry
124 Halsey Street
P.O. Box 45005
Newark, NJ 07101

E-mail us at AskConsumerAffairs@lps.state.nj.us or
visit our Web site at <http://www.NJConsumerAffairs.com>



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New Jersey Office of the Attorney General

